

**DPS****Montgomery County
Department of Permitting Services**

255 Rockville Pike, 2nd Floor
 Rockville, MD 20850-4166
 Phone: 311 in Montgomery County or (240)777-0311
 Fax: (240)777-6262
<http://www.montgomerycountymd.gov/dps>

**Application for Reciprocal Electrical License Other Jurisdictions****A. Type of Application**

☐ Journeyman ☐ Master Limited ☐ Master

***To review our current licensing procedures & fees please visit our website
 or call 311, (240-777-0311 if outside Montgomery County) for current fee schedule**

NOTE: FEES ARE SUBJECT TO ANNUAL CHANGES EFFECTIVE JULY 1ST

B. For Office Use Only

License No: _____ Check No: _____ Fee Paid: _____
 Receipt No: _____ Issue Date: _____ Expiration Date: _____
 Approved { } Disapproved { }

Member, Board of Electrical Examiners, Montgomery County Maryland _____ Date _____

C. Part One: (Applications that are not complete will be returned – Please print).

Name of Applicant: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

E-mail Address: _____

The Electrical Business you are representing in Montgomery County:

Business Name: _____

Address: _____

E-mail Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Have you ever had any electrical licenses suspended or revoked? { } Yes { } No

Have you ever been denied the issuance of electrical permits? { } Yes { } No

(If the answer is "yes" for the above questions give the details on a separate sheet of paper)

I hereby apply for a Reciprocal Electrical License from _____ County/City _____

**NOTE: ATTACH A SIGNED PHOTOSTATIC COPY OF YOUR CURRENT LICENSE SHOWING THE EXPIRATION DATE
 AND LICENSE NUMBER. LICENSE MUST HAVE BEEN OBTAINED BY EXAMINATION NOT RECIPROCATION.
 IF MASTER/LIMITED MASTER ELECTRICAL BUSINESS NAME SHOULD BE ON LICENSE.**

D. Part Two: (To be completed by the Electrical Board or by Licensing Authority in the applicant's jurisdiction).

I hereby certify and attest that (name of applicant) _____ has satisfactorily
 proven to me to hold a current electrical license of the following classification { } Master { } Limited Master { } Journeyman
 which was originally issued on (date) _____ by this jurisdiction as a license received by: { } examination;
 not by reciprocity from another jurisdiction. Review of our records indicates no current violations of regulations or current
 suspension of license against said applicant as of the date of signing.

Signature of authorized Board Member/Approving Officer _____

Date _____

Title and jurisdiction of Board Member/Approving Officer _____

Telephone Number _____

"I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND
 CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF." I further authorize the release of any
 information contained within this application to an authorized representative of the Department of Permitting Services for further
 investigation.

Original Signature of Applicant: _____ Date: _____

Print Name: _____